

<i>SERFF Tracking Number:</i>	<i>EMCC-125639564</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>EMC Property & Casualty Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>AR-CP-2008-02</i>		
<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>
<i>Product Name:</i>	<i>Commercial Property</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing at a Glance

Companies: EMC Property & Casualty Company, Union Insurance Company of Providence		
Product Name: Commercial Property	SERFF Tr Num: EMCC-125639564	State: Arkansas
TOI: 01.0 Property	SERFF Status: Closed	State Tr Num: EFT \$50
Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)	Co Tr Num: AR-CP-2008-02	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
	Author: Jo Byers	Disposition Date: 05/14/2008
	Date Submitted: 05/08/2008	Disposition Status: Approved
Effective Date Requested (New): 07/01/2008		Effective Date (New): 07/01/2008
Effective Date Requested (Renewal): 07/01/2008		Effective Date (Renewal): 07/01/2008
State Filing Description:		

General Information

Project Name:	Status of Filing in Domicile: Not Filed
Project Number:	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 05/14/2008	
State Status Changed: 05/14/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
May 8, 2008	

Commissioner of Insurance
Arkansas Insurance Department
1200 West Third St.

SERFF Tracking Number: *EMCC-125639564* *State:* *Arkansas*
First Filing Company: *EMC Property & Casualty Company, ...* *State Tracking Number:* *EFT \$50*
Company Tracking Number: *AR-CP-2008-02*
TOI: *01.0 Property* *Sub-TOI:* *01.0001 Commercial Property (Fire and Allied Lines)*

Product Name: *Commercial Property*

Project Name/Number: */*

Little Rock, AR 72201-1904

UNION INSURANCE COMPANY OF PROVIDENCE – 062-21423

EMC PROPERTY & CASUALTY COMPANY – 062-25186

Commercial Property

Form Filing

Introduce New Companies

Company File # AR-CP-2008-02

Effective: July 1, 2008

We are pleased to introduce Union Insurance Company of Providence and EMC Property & Casualty Company. These companies are members of the EMC Insurance Companies group. We currently have the Commercial Property program on file with your department under Employers Mutual Casualty Company and EMCASCO Insurance Company. These new companies will be available for policies written on or after July 1, 2008.

The decision to introduce these new companies is based on the competitive market place and will allow us to compete on a more competitive level. Our currently filed forms and endorsements for this program will be applicable to Union and EMC P&C. A listing of our currently filed forms and endorsements is attached.

We supplement this filing with the \$50.00 filing fee (EFT), Property and Casualty Transmittal Document, and Forms List.

We respectfully request your approval of this filing, to be applicable to policies written on or after July 1, 2008. Thank you.

Jo L. Byers, Filings Analyst

Rates and Filings Dept.

(800) 247-2128 Ext. 2707

jo.l.byers@emcins.com

SERFF Tracking Number: EMCC-125639564 State: Arkansas

First Filing Company: EMC Property & Casualty Company, ... State Tracking Number: EFT \$50

Company Tracking Number: AR-CP-2008-02

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)

Product Name: Commercial Property

Project Name/Number: /

Company and Contact

Filing Contact Information

Jo Byers, Filings Analyst Jo.L.Byers@EMCIns.com
 PO Box 712 (800) 247-2128 [Phone]
 Des Moines, IA 50306-0712 (515) 345-2223[FAX]

Filing Company Information

EMC Property & Casualty Company CoCode: 25186 State of Domicile: Iowa
 717 Mulberry Street Group Code: 62 Company Type: P & C
 Des Moines, IA 50309 Group Name: State ID Number:
 (800) 247-2128 ext. [Phone] FEIN Number: 63-0329091

Union Insurance Company of Providence CoCode: 21423 State of Domicile: Iowa
 717 Mulberry Street Group Code: 62 Company Type: P & C
 Des Moines, IA 50309 Group Name: State ID Number:
 (800) 247-2128 ext. [Phone] FEIN Number: 05-0230479

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
EMC Property & Casualty Company	\$50.00	05/08/2008	20166484
Union Insurance Company of Providence	\$0.00	05/08/2008	

SERFF Tracking Number:	EMCC-125639564	State:	Arkansas
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Company Tracking Number:	AR-CP-2008-02		
TOI:	01.0 Property	Sub-TOI:	01.0001 Commercial Property (Fire and Allied Lines)
Product Name:	Commercial Property		
Project Name/Number:	/		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	05/14/2008	05/14/2008

SERFF Tracking Number:	EMCC-125639564	State:	Arkansas
First Filing Company:	EMC Property & Casualty Company, ...	State Tracking Number:	EFT \$50
Company Tracking Number:	AR-CP-2008-02		
TOI:	01.0 Property	Sub-TOI:	01.0001 Commercial Property (Fire and Allied Lines)
Product Name:	Commercial Property		
Project Name/Number:	/		

Disposition

Disposition Date: 05/14/2008
Effective Date (New): 07/01/2008
Effective Date (Renewal): 07/01/2008
Status: Approved
Comment:

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

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<i>First Filing Company:</i>	<i>EMC Property & Casualty Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>AR-CP-2008-02</i>		
<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>
<i>Product Name:</i>	<i>Commercial Property</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Accepted for Informational Purposes	Yes
Supporting Document	Forms list	Accepted for Informational Purposes	Yes

<i>SERFF Tracking Number:</i>	<i>EMCC-125639564</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>EMC Property & Casualty Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>AR-CP-2008-02</i>		
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<i>Product Name:</i>	<i>Commercial Property</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: EMCC-125639564 State: Arkansas
First Filing Company: EMC Property & Casualty Company, ... State Tracking Number: EFT \$50
Company Tracking Number: AR-CP-2008-02
TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)
Product Name: Commercial Property
Project Name/Number: /

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-Property & Casualty
Review Status: Accepted for Informational Purposes 05/14/2008
Comments:
Attachment: pctd.pdf

Satisfied -Name: Forms list
Review Status: Accepted for Informational Purposes 05/14/2008
Comments:
Attachment: Forms list.pdf

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only a. Date the filing is received: b. Analyst: c. Disposition: d. Date of disposition of the filing: e. Effective date of filing: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">New Business</div> <div style="width: 55%;"></div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">Renewal Business</div> <div style="width: 55%;"></div> </div> f. State Filing #: g. SERFF Filing #: h. Subject Codes
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3. Group Name	Group NAIC #
EMC Insurance Companies	062

4. Company Name(s)	Domicile	NAIC #	FEIN #
Union Insurance Company of Providence	IA	21423	05-0230479
EMC Property & Casualty Company	IA	25186	63-0329091

5. Company Tracking Number	AR-CP-2008-02
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Jo L. Byers P.O. Box 712 Des Moines, IA 50306-0712	Filings Analyst	800-247-2128 ext. 2707	515-345-2223	Jo.L.Byers@EMCIns.com

7. Signature of authorized filer	
8. Please print name of authorized filer	Jo L. Byers

Filing information (see General Instructions for descriptions of these fields)

9.	Type of Insurance (TOI)	Commercial Property
10.	Sub-Type of Insurance (Sub-TOI)	Commercial Property
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12.	Company Program Title (Marketing title)	Commercial Property
13.	Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14.	Effective Date(s) Requested	New: 7/1/08 Renewal: 7/1/08

Property & Casualty Transmittal Document---

15.	Reference Filing?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
16.	Reference Organization (if applicable)		
17.	Reference Organization # & Title		
18.	Company's Date of Filing	5/8/08	
19.	Status of filing in domicile	<input checked="" type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved	

20.	This filing transmittal is part of Company Tracking #	AR-CP-2008-02
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
<div style="margin-bottom: 20px;"> Check #: EFT Amount: 50.00 </div> <p>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>	

*****Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)

(Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #		AR-CP-2008-02		
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)				
3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement Or withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	See forms list attached		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

State	Number	Editor	LOB	Co	Current	Description	Eff Date	Appr Date	Special Action	Dept File #
AR	CP7000	10-00	CP	A	<input checked="" type="checkbox"/>	Commercial Property Dec	1/1/2001	10/30/2000		
AR	CP7000A	01-86	CP	A	<input checked="" type="checkbox"/>	Commercial Property Dec - auto	1/1/1986	12/11/1985		
AR	CP7001	10-00	CP	A	<input checked="" type="checkbox"/>	Commercial Property Sched	1/1/2001	10/30/2000		
AR	CP7001A	01-86	CP	A	<input checked="" type="checkbox"/>	Commercial Property Sched - auto	1/1/1986	12/11/1985		
AR	CP7003	01-86	CP	A	<input checked="" type="checkbox"/>	Schedule of Locations	1/1/1986	12/11/1985		
AR	CP7003A	01-86	CP	A	<input checked="" type="checkbox"/>	Schedule of Locations - auto	1/1/1986	12/11/1985		
AR	CP7007.1	10-00	CP	A	<input checked="" type="checkbox"/>	Quick Ref-Commercial Prop Cov Part	1/1/2001	10/30/2000		
AR	CP7110	01-04	CP	A	<input checked="" type="checkbox"/>	Fire Department Coverage Extensions	4/1/2004	2/24/2004		
AR	CP7117	11-95	CP	A	<input checked="" type="checkbox"/>	Contractors Extra Expense Cov	4/1/1996	2/12/1996		
AR	CP7121	12-04	CP	A	<input checked="" type="checkbox"/>	Public Entity Bldg and Pers Property Cov Form	5/1/2005	2/4/2005		
AR	CP7121.4	10-04	CP	A	<input checked="" type="checkbox"/>	Quick Ref - Public Entity	5/1/2005	2/4/2005		699QAC884
AR	CP7132	03-94	CP	A	<input checked="" type="checkbox"/>	Hospital Property Cov Form	8/15/1994	5/23/1994		
AR	CP7132.1	03-94	CP	A	<input checked="" type="checkbox"/>	Quick Ref - Hospital Prop	8/15/1994	5/23/1994		
AR	CP7132.2	03-94	CP	A	<input checked="" type="checkbox"/>	Commercial Prop Conditions	8/15/1994	5/23/1994		
AR	CP7159	10-02	CP	A	<input checked="" type="checkbox"/>	Broadened Property Extension Endorsement	3/1/2003	1/27/2003		
AR	CP7303	08-98	CP	A	<input checked="" type="checkbox"/>	Bus Inc/Extra Expense Cov - Y2K Comp-Rel	11/1/1998	9/28/1998		
AR	CP7313	01-04	CP	A	<input checked="" type="checkbox"/>	Equipment Protection Endorsement	4/1/2004	2/24/2004		
AR	CP7314	01-04	CP	A	<input checked="" type="checkbox"/>	Equipment Breakdown Endorsement	4/1/2004	2/24/2004		
AR	CP7320	06-07	CP	A	<input checked="" type="checkbox"/>	Property Extension Endorsement	10/15/2007	7/17/2007		AR-PC-07-025468
AR	CP7321	06-05	CP	A	<input checked="" type="checkbox"/>	Wholesaler's Industry Extension	8/1/2005	6/13/2005		6D8SAZ951
AR	CP7322	06-05	CP	A	<input checked="" type="checkbox"/>	Metal Goods Manufacturers' Industry Extension	8/1/2005	6/13/2005		6D8SAZ951
AR	CP7323	06-05	CP	A	<input checked="" type="checkbox"/>	Printers' Industry Extension	8/1/2005	6/13/2005		6D8SAZ951
AR	CP7327	03-06	CP	A	<input checked="" type="checkbox"/>	Financial Institutions Property Extension	7/1/2006	6/12/2006		AR-PC-06-020068
AR	CP7329	09-06	CP	A	<input checked="" type="checkbox"/>	Amend of Coverage.-Public Entity Bldg/Person	2/1/2007	11/8/2006		AR-PC-06-021929
AR	CP7331	10-07	CP	A	<input checked="" type="checkbox"/>	Business Inc (And Extra Exp) Act Loss Sustain ed Spec Limit	10/15/2007	7/17/2007		AR-PC-07-025468